


Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In re application of: **Benjamin OSHLACK et al.**  
Serial No.: 10/689,866  
Filed: October 21, 2003  
For: **TAMPER-RESISTANT ORAL OPIOID AGONIST FORMULATIONS**

Sir:

Transmitted herewith is an **Information Disclosure Statement (2 pages)** in the above-identified application.

- ☒ Also transmitted herewith are:
- ☐ Petition for extension under 37 C.F.R. 1.136
  - ☐ Return receipt postcard
  - ☒ Other: Form PTO-1449 (1 page) with copies of references A12 and A19.
- ☐ Check(s) in the amount of \$ \_\_\_\_\_ is/are attached to cover:
- ☐ Filing fee for additional claims under 37 C.F.R. 1.16
  - ☐ Petition fee for extension under 37 C.F.R. 1.136
  - ☐ Fee set forth in 37 C.F.R. §1.17(p)
  - ☐ Other:
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.
- ☐ Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.
  - ☒ Any patent application processing fees under 37 C.F.R. 1.17.
  - ☒ Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 C.F.R. 1.136.

  
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